

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		5	3-26-77
FORMALITY REVIEW	MM	386	4/5/78

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 - Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
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Original	
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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